PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number 210 136 US 99

(Column 1) (Column 1)						mn 2)	SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			114				RATE	FEE] [RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			// 4 minus 20=		• (94 -	X\$ 9=		OR	X\$18=	16 92
INDEPENDENT CLAIMS			4 minus 3 =		*	1	X40=		OR	X80=	-80
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=		OR	+270=	_
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	2482
	C		MENDED - PART II				SMALL	FNTITV	OR	OTHER SMALL	
	2-20-	(Column 1) CLAIMS		(Colu	mn 2) IEST	(Column 3)	SWALL		0H 	SWALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	•	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CLAIL	=	X40=		OR	X80=	
Ц	THOI PHESE	NTATION OF M	OLTIPLE DE	- CNDEN	LAIM		+135=		OR	+270=	
							TOTAL	<u> </u>	OR	TOTAL	
		(Column 1)		(Col:	ımn 2\	(Column 3)	ADDIT. FEE	-	1 - ' '	ADDIT. FEE	
		(Column 1) CLAIMS		HIG	ımn 2) HEST			ADDI-]		ADDI-
ENT B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T () ()	=	X40=		OR	X80=	
	THIRST PHESE	NTATION OF M	ULTIPLE DE	PENDEN	1 CLAIM		+135=		OR	+270=	
							TOTAL			TOTAL ADDIT. FEE	
- 1		(Column 1)		(Coli	ımn 2)	(Column 3)	ADDIT. FEE		•	AUUII. FEE	
		CLAIMS		HIG	HEST			ADDI-	1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL FEE
	Total	•	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	X40=	-	1	X80=	
	FIRST PRESE	ENTATION OF M	ULTIPLE DE	ILTIPLE DEPENDEN					OR	100-	
	If the entering set	uma 1 ia laga than t	the entre in an	lump () ····	to "O" in a	ohumn 3	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											L
l "		umber Previously F mber Previously Pa						propriate bo	x in co		